UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA		Involuntary Petition		
IN RE (Name of Debtor - If individual: Last, First, Middle)	ALL OTHER NAMES (Include married, mai	used by the debtor in den, and trade names		
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all.)				
STREET ADDRESS OF DEBTOR (No. and street, city, state and zip code)	MAILING ADDRESS	OF DEBTOR (If differ	rent from street address)	
County of Residence or Principal Place of Business ZIP CODE			ZIP CODE	
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses)				
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED				
☐ Chapter 7 ☐ Chapter 11				
INFORMATION REGARDING DEBT	OR (Check applicable	boxes)		
Petitioners believe TYI Debts are primarily consumer debts Debts are primarily business debts Debts are primarily business debts Debts are primarily business debts	Partnership	Stockbroker Commodity Broker Railroad		
BRIEFLY DESCRIBE NATURE OF BUSINESS				
VENUE	FILING FEE (Check one box)			
 Debtor has been domiciled or has had a residence, principal place of business or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. A bankruptcy case concerning debtor's affiliate, general partner, or 	□ Full filing fee attached □ Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached.			
partnership is pending in this District.				
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.)				
Name of Debtor	Case Number	Date		
Relationship	District	Judge		
ALLEGATIONS (Check applicable boxes) 1. Petitioner(s) are eligible to file this petition pursuant to 11 U.S.C. § 2. The debtor is a person against whom an order for relief may be enter United States Code. 3.a. The debtor is generally not paying such debtor's debts as they bee debts are the subject of a bona fide dispute as to liability or amount or b. Within 120 days preceding the filing of this petition, a custodian receiver, or agent appointed or authorized to take charge of less thar property of the debtor for the purpose of enforcing a lien agains	red under title 11 of the ome due, unless such ;; , other than a trustee, a substantially all of the		PACE FOR USE ONLY	
appointed or took possession.				

If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in \S 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.

Involuntary Petition	Name of Debtor			
TRANSFER OF CLAIM				
Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).				
REQUEST FOR RELIEF				
Petitioner(s) request that an order for relief be entered against the debtor any petitioner is a foreign representative appointed in a foreign proceeding	r under the chapter of title 11, United Stating, a certified copy of the order of the cou	es Code, specified in this petition. If irt granting recognition is attached.		
Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.				
X Signature of Petitioner or Representative (State Title)	XSignature of Attorney	 Date		
Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual Signing in Representative Capacity	Address			
	Telephone No.			
X Signature of Petitioner or Representative (State Title)	_			
Signature of Petitioner or Representative (State Title)	Signature of Attorney	Date		
Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual Signing in Representative Capacity	Address Telephone No.			
	Tolophone No.			
X Signature of Petitioner or Representative (State Title)	X Signature of Attorney	 Date		
		Date		
Name of Petitioner Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual Signing in Representative Capacity	Address			
Telephone No.				
PETITIONING CREDITORS				
Name and Address of Petitioner	Nature of Claim	Amount of Claim		
Name and Address of Petitioner	Nature of Claim	Amount of Claim		
Name and Address of Petitioner	Nature of Claim	Amount of Claim		
Note: If there are more than three petitioners, attach additional shee perjury, each petitioner's signature under the statement and the rinformation in the format above.	Total Amount of Petitioners' Claims			
Continuation Sheets attached				